

CLAIMS ONLY

Application Number

Filing Date

09/427,180

Applicant(s)

BEST AVAILABLE COPY

10/26/99 10/25/03 4/12/04

* May be used for additional claims or amendments

| CLAIMS | AS FILED | | AFTER FIRST AMENDMENT | | AFTER SECOND AMENDMENT | |
|--------------|----------|--------|-----------------------|--------|------------------------|--------|
| | Indep | Depend | Indep | Depend | Indep | Depend |
| 1 | 1 | | | | | |
| 2 | | 1 | | 1 | | |
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| 17 | 1 | | 1 | | | |
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| Total indep | | | | | | |
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| | AS FILED | | AFTER FIRST AMENDMENT | | AFTER SECOND AMENDMENT | |
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| | Indep | Depend | Indep | Depend | Indep | Depend |
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| Total indep | 2 | | 2 | | 2 | |
| Total Depend | 106 | | 106 | | 34 | |
| Total Claims | 108 | | 108 | | 36 | |

CLAIMS ONLY

BEST AVAILABLE COPY

Application Number

09/427,180

Filing Date

Applicant(s)

* May be used for additional claims or amendments

| CLAIMS | AS FILED 11/13/05 | | AFTER FIRST AMENDMENT | | AFTER SECOND AMENDMENT | |
|-----------------|----------------------|--------|--------------------------|--------|---------------------------|--------|
| | Indep | Depend | Indep | Depend | Indep | Depend |
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| Total Indep | 2 | | | | | |
| Total Depend | 9 | | | | | |
| Total Claims | 11 | | | | | |

8-082